

EMERGENCY FEEDING ORGANIZATION (EFO) MONITORING INSTRUMENT

Use of form: This form will be used by the Division of Children and Family Services (DCFS) staff as a monitoring instrument to determine EFO compliance with the state and federal requirements for TEFAP.

Instructions: Check appropriate box to the left of each question; "Y" (Yes), "N" (No), "NA" (not applicable) or "U" (unable to determine compliance). Any questionable findings must be described in "Reviewer Comments / Notes" located at the end of each objective.

The following section may be completed prior to conducting the EFO review.

State / Agency Agreement Amount \$		Federal Fiscal Program Year (FFY)	Type of Review (Check one) <input type="checkbox"/> Regular <input type="checkbox"/> Follow-Up <input type="checkbox"/> Special
Main EFO Office			
Name		Mailing Address	
Telephone Number	Fax Number	E-Mail Address	
Satellite EFO Offices			
Mailing Address		Telephone Number	
Mailing Address		Telephone Number	
Mailing Address		Telephone Number	
Mailing Address		Telephone Number	
Name - Executive Director		Telephone Number	
Name - Fiscal Agent		Telephone Number	
Name - Program Manager		Telephone Number	
Name - Person Completing Review		Date of Review	

OBJECTIVE I.

Determine compliance with general contract provisions of the State / Agency Agreement for TEFAP.

<u>Y</u>	<u>N</u>	<u>NA</u>	<u>U</u>	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	1. Does the EFO currently have a not-for-profit corporation charter from the Wisconsin Secretary of State and verification from the Internal Revenue Service (IRS) of exemption from federal income tax liability under applicable Section 501(3) or 501(4) of the Internal Revenue Code?
				2. Are the following documents currently on file?
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	State / Agency Agreement?
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Contract Modification (if applicable)
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Procedures Manual for The Emergency Food Assistance Program
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Operational Memos
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	All commodity records for the current and past three years
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Copies of subcontracts for program administration / services
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Copies of site agreements with outlets
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	3. Have EFO staff and distribution site volunteers been trained regarding nondiscrimination regulations and the FNS Instruction 113.3, Civil Rights Compliance and Enforcement to ensure that in the operation of the program no person is discriminated against because of race, color, national origin, age, sex or handicap?
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	4. Does the EFO display the federal "And Justice for All" poster and is it visible to all clients?
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	5. Does the EFO assure that information about the program is provided to minority organizations and individuals by its outlets?
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	6. Does the EFO serve non-English speaking individuals on a regular basis? If "Yes", what languages other than English are requested? _____
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	7. Does the EFO and its outlets have bilingual materials or personnel available to assist the non-English speaking clients?
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	8. Have there been any complaints of discrimination made in the past year? If "Yes", describe the complaint and provide information regarding the corrective actions taken to resolve the complaint.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	9. Was the complaint forwarded to DCFS and USDA / FNS?

- | <u>Y</u> | <u>N</u> | <u>NA</u> | <u>U</u> | |
|--------------------------|--------------------------|--------------------------|--------------------------|---|
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 10. Are the EFO staff and distribution site volunteers aware of the proper procedures for forwarding discrimination complaints? |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 11. Do public notifications contain the appropriate nondiscrimination statement? |

Reviewer Comments / Notes

OBJECTIVE II.

Determine that the EFO conducts appropriate distribution and administrative activities for The Emergency Food Assistance Program.

A. Distribution Plan

- | <u>Y</u> | <u>N</u> | <u>NA</u> | <u>U</u> | |
|--------------------------|--------------------------|--------------------------|--------------------------|---|
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 1. Does the EFO use a uniform application to determine eligibility for local outlets to request participation in TEFAP? |
| | | | | 2. When considering and / or recruiting local organizations to participate in TEFAP, does the EFO consider the following factors? |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Adequacy of the storage and distribution facility |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Ability to maintain required records |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | A written policy of nondiscrimination |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Geographic proximity of other distribution sites offering similar services |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Length of time the distribution site has been in operation |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Ability to maintain the required minimum operating hours |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Ability to comply with federal / state operating / participation standards |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Ability of the site to <u>maintain</u> at least a 50 percent supply of non-USDA foods from sources other than TEFAP |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 3. Do your outlets serve a designated service area? |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 4. Does the distribution method assure that sites receive product in an appropriate and timely manner? |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 5. Does the EFO interact with other food distribution and social service agencies to coordinate food resources to ensure that the emergency food needs of its service area are met? |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 6. Are the hours and days of operation posted at all times at the entrances to your sites and is this information visible to clients? |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 7. Do your sites post the income guidelines and appropriate posters in areas visible to clients? |

Y N NA U

8. What type of outreach activities does the EFO conduct to assure that needy residents of the service area are aware of the location and operating hours of soup kitchens and pantries in its service area?

- ☐ ☐ ☐ ☐ 9. Does the EFO provide this information to county government agencies, outreach workers, homeless populations, churches, help lines, newspapers, media, etc.?

Reviewer Comments / Notes**B. Distribution Sites**Y N NA U

- ☐ ☐ ☐ ☐ 1. Does the EFO physically inspect all pantries, soup kitchens and shelters prior to participation by the site in TEFAP?
- ☐ ☐ ☐ ☐ 2. Does the EFO monitor its outlets on a regular basis to ensure that food storage space and procedures meet federal and state requirements?
If "Yes", how often does the EFO conduct monitoring at its sites? _____
Number of outlets in the EFO service area that have: Refrigerators _____ Freezers _____
- ☐ ☐ ☐ ☐ 3. Does the EFO have reports on file that were used to document the monitoring of all distribution sites for the current contract year?
4. How many counties does the EFO serve? _____
5. How many outlets are under contract with the EFO? Pantries _____ Soup kitchens _____ Shelters _____
Characterize area served: ☐ Rural ☐ Urban ☐ Other
- ☐ ☐ ☐ ☐ 6. Does the EFO update the agreements with its outlets on an annual basis?
- ☐ ☐ ☐ ☐ 7. Does the EFO have a current contract with each distribution site?
- ☐ ☐ ☐ ☐ 8. Has the EFO submitted a master list of outlets for its service area, including the names, addresses, contact person, telephone number and days and hours of operation for each site?

- | <u>Y</u> | <u>N</u> | <u>NA</u> | <u>U</u> | |
|--------------------------|--------------------------|--------------------------|--------------------------|--|
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 9. Is the list current and accurate? |
| | | | | 10. How many on-site reviews have been conducted by the EFO for the current year? _____ |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 11. Does the EFO monitor its outlets to ensure that a 50 percent level of non-USDA food is <u>maintained</u> for distribution with the TEFAP commodities? |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 12. Does the EFO monitor to determine whether its outlets are distributing TEFAP commodities <u>and</u> non-USDA food in the food package provided to clients? |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 13. Has the EFO informed the outlets in writing and in training with outlets of the restriction against reprocessing / repackaging TEFAP commodities? |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 14. Does the EFO monitor its outlets to ensure TEFAP commodities are not processed or repackaged? |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 15. Does the EFO determine how often clients can receive food from pantries? |
| | | | | If "No", explain / describe. |
| <hr/> | | | | |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 16. Does the EFO provide training to distribution site staff? |
| | | | | 17. Describe the types and the dates of training conducted for distribution site staff within the last year. |
| <hr/> | | | | |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 18. Does the EFO have a system in place to serve the homebound, elderly and working poor? |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 19. Do your outlets use a proxy system? |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | If "Yes", is written authorization required? |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 20. Does the homebound recipient complete and / or sign the CFS-2001 form to verify eligibility in the program? |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | If "No", does the proxy complete and / or sign the CFS-2001 form for the homebound household? |

Reviewer Comments / Notes

C. Commodity Delivery and Storage at the EFO

Y N NA U

☐ ☐ ☐ ☐ 1. Are the commodities delivered and stored at the EFO?

☐ ☐ ☐ ☐ 2. Does the EFO use any storage facilities other than at the EFO?
If "Yes", indicate the name and location for all off-site storage sites.

☐ ☐ ☐ ☐ 3. Are the commodities kept 6" off the floor and stored on pallets, platforms or shelves?

☐ ☐ ☐ ☐ 4. Are the commodities stored at least 4" away from walls to allow proper ventilation and permit good air circulation and with sufficient space; i.e., working aisles?

☐ ☐ ☐ ☐ 5. Are storage areas free of uninsulated steam and hot water pipes, water heaters, refrigeration condensing units or other heat producing devices?

☐ ☐ ☐ ☐ 6. Are non-food items kept separated from the commodities?

☐ ☐ ☐ ☐ 7. Are toxic items (soap, bleach, cleaning supplies) stored away from the commodities?

☐ ☐ ☐ ☐ 8. Are the floors, pallets and shelving clean?

☐ ☐ ☐ ☐ 9. Are the commodity storage areas clean?

☐ ☐ ☐ ☐ 10. Is there a regular cleaning schedule established and logged?

☐ ☐ ☐ ☐ 11. Are the commodities checked regularly for signs of spoilage or damage and are the dates of the inspection logged?

☐ ☐ ☐ ☐ 12. Are the doors, windows and roofs well sealed to prevent pest entry and / or water damage?

☐ ☐ ☐ ☐ 13. Do the storage areas have adequate safeguards to prevent theft, spoilage, or other loss (locks on doors, windows, limited access)?

- | <u>Y</u> | <u>N</u> | <u>NA</u> | <u>U</u> | |
|--------------------------|--------------------------|--------------------------|--------------------------|---|
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 14. Is a good pest control system maintained by a person on staff or does the EFO contract with a licensed firm to manage pest control? |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 15. Is the equipment well maintained? |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 16. Are there working thermometers in all the storage areas (dry, refrigerated, freezer)? |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 17. Is a temperature log maintained? |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 18. Are dry, refrigerated and frozen items stored at proper temperatures? |
| | | | | Actual reading (dry storage) _____ ° F. |
| | | | | Actual reading (refrigerated storage) _____ ° F. |
| | | | | Actual reading (frozen storage) _____ ° F. |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 19. Are controls in place that assure a first-in, first-out inventory flow; i.e., is inventory rotated? |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 20. Are there any TEFAP commodities currently in storage that were received more than six months prior to the date of this review? |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 21. Is a physical inventory count completed monthly? |
| | | | | If "No", how often is a count completed? _____ |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 22. Is the physical count reconciled to the book inventory? |
| | | | | If "Yes", describe the procedure. |
| <hr/> | | | | |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 23. Is the inventory in storage appropriate considering the size of the EFO service area, its distribution activities, and its physical facilities? |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 24. Has the EFO experienced any losses during the past 12 months (including those that occurred at off-site storage facilities and outlets)? |
| | | | | If "Yes", explain the losses and describe the process used by the EFO to deal with the losses. |
| <hr/> | | | | |

Y N NA U
☐ ☐ ☐ ☐

25. Does the EFO have insurance coverage for the maximum value of commodities expected in storage at any one time?

Reviewer Comments / Notes

OBJECTIVE III.

Determine if the EFO uses an allocation method which fairly allocates TEFAP commodities among its outlets.

The following documents are necessary for determining adherence: PI-1412, Monthly Allocation document from DPI and CFS-2000, Verification of Transfer of TEFAP Commodities to Outlets.

Y N NA U
☐ ☐ ☐ ☐

1. Does the EFO adhere to the county allocations provided by DCFS?

Is the allocation to sites within counties in the EFO service area based on objective data such as:

☐ ☐ ☐ ☐

a. Adequacy of the storage and distribution facility

☐ ☐ ☐ ☐

b. Number of clients served as documented by service statistics

☐ ☐ ☐ ☐

c. Ability of site to maintain required records

If "No", describe the allocation method to determine the amount of commodities to be allocated to pantries within the EFO geographical service area.

☐ ☐ ☐ ☐

2. Does the EFO use the 50 percent match requirement to calculate the percentage of TEFAP commodities allocated to each pantry and soup kitchen?

If "No", describe the allocation method to determine the amount of commodities to be allocated to pantries within the EFO geographical service area.

OBJECTIVE IV.

Assess the method used to count / estimate the amount of privately donated food distributed by the EFO.

The State / Agency Agreement for TEFAP requires that 50 percent of the food distributed by sites must be from sources other than TEFAP.

Y N NA U

1. What amount of non-USDA food was distributed by the EFO and / or its sites for the previous contract year? _____

☐ ☐ ☐ ☐ 2. How did the EFO compile / estimate these numbers?

☐ ☐ ☐ ☐ 3. If the method used is based on estimates, is the method based on practical / realistic data?

☐ ☐ ☐ ☐ 4. If actual pounds are used to calculate the amount of non-USDA food, when and how does the EFO document the number of pounds?

☐ ☐ ☐ ☐ 5. Is the method for documenting actual pounds an accurate method?

☐ ☐ ☐ ☐ 6. Does the EFO have a cooperative agreement with a food bank(s) for your service area?

☐ ☐ ☐ ☐ 7. Does the EFO allocate funds to and / or on behalf of its outlets for the shared maintenance fees charged by food banks?

Reviewer Comments / Notes

OBJECTIVE V.

Determine if distribution outlets contracted by the EFO are in compliance with federal and state TEFAP requirements / policies.

Site Problems

Pantries and soup kitchens will be reviewed prior to, during, or after the EFO review conducted by DCFS staff. Specific site problems and appropriate correction actions will be identified in a written report to the EFO.

OBJECTIVE VI.

Y N NA U

- | | | | | | |
|--------------------------|--------------------------|--------------------------|--------------------------|----|--|
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 1. | Does the EFO have adequate insurance or assets to cover the value of TEFAP losses as required by the State / Agency Agreement? |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 2. | Does the EFO submit the monthly CARS expenditure reimbursement report in a timely manner? |

Reviewer Comments / Notes**OBJECTIVE VII.**

Determine that the EFO maintains and reports accurate records of commodities provided to distribution outlets.

The EFO must submit reports to DCFS / BCFD for the receipt and distribution of TEFAP commodities within 15 days after the end of a reporting month. The following reports are required of EFOs to provide for commodity accountability. Note that the timeliness of submission of the EFO Monthly Report form (CFS-2003) will be reviewed prior to the EFO review.

PI-1412	DPI Commodity Invoice
CFS-2000	Verification of Transfer of TEFAP Commodities to Sites
CFS-2002	Inventory of TEFAP Commodities at Sites
CFS-2003	Inventory of TEFAP Commodities
CFS-2004	TEFAP Commodity Loss Report (as applicable)
CFS-2005	TEFAP Commodity Complaint Report (as applicable)
CFS-2006	Verification for Transfer of TEFAP Commodities Between EFOs (as applicable)

Complete Objective VII., Worksheet I to reconcile / verify EFO receipts against receipts for distribution of commodities to sites.

Y N NA U

- | | | | | | |
|--------------------------|--------------------------|--------------------------|--------------------------|----|--|
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 1. | Are the "Verification of Transfer of TEFAP Commodities to Outlets" (CFS-2000) forms maintained on file at the EFO? |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 2. | Are completed copies of the "Inventory of TEFAP Commodities at Outlets" (CFS-2002) forms maintained on file at the EFO? |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 3. | Are the "Inventory of TEFAP Commodities at Sites" (CFS-2002) forms used by the outlets to document monthly inventory balances and participation levels submitted to the EFO in a timely basis? |

<u>Y</u>	<u>N</u>	<u>NA</u>	<u>U</u>	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	4. Does the EFO complete the "Inventory of TEFAP Commodities" report (CFS-2003) form using information compiled from the monthly CFS-2002 reports?
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	5. Does the EFO submit the CFS-2003 to DCFS by the 15 th of each month for the preceding month of distribution?
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	6. Did the EFO complete a "TEFAP Commodity Loss" report (CFS-2004) form during the last 12 month period, and if so was it submitted in a timely basis?
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	7. If applicable, did the EFO complete a "TEFAP Commodity Complaint" report (CFS-2005) form during the last 12 month period, and if so was it submitted in a timely basis?
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	8. If applicable, did the EFO complete a "Transfer Notice for TEFAP Commodities" (CFS-2006) form indicating the transfer of commodities to another EFO?

Reviewer Comments / Notes

OBJECTIVE VIII.

Determine if commodities are distributed to eligible participants according to established guidelines and that accurate distribution records are maintained.

DCFS staff will review at random a sample of the "Eligibility Certification for the Emergency Food Assistance Program" (CFS-2001) signature cards to determine if they are completed and accurate. The application form (CFS-2001) requires the following information:

- Household name
- Household address including county of residence (If practical)
- Household telephone number
- Number in household
- Participant's signature (verification of self-declared eligibility)
- Date of distribution

Reviewer Comments / Notes

OBJECTIVE IX.

Describe exemplary activities of the EFO and / or its sites to provide food security for low income families and individuals.

Best Practices / Procedures:

INVENTORY RECONCILIATION FOR TEFAP COMMODITIES AT EFO

[illegible]